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MAR 03 2004

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/805,925	03/15/2001	Tatsuya Kunikiyo	204720US2	2893

TITLE OF INVENTION: ACTIVE INDUCTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	03/08/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GLENN, KIMBERLY E	2817	333-215000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. OBLON, SPIVAK,  
2. McCLELLAND, MAIER  
3. & NEUSTADT, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Renesas Technology Corp.

Tokyo, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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4b. Payment of Fee(s):

☒ Issue Fee☐ A check in the amount of the fee(s) is enclosed.☒ Publication Fee☒ Payment by credit card. Form PTO-2038 is attached.☐ Advance Order - # of Copies -0-☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 15-0030 (enclose an extra copy of this form).

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(Authorized Signature)

(Date)

*Joseph A. Scapellato, Reg. No. 26,803* *March 3, 2004*

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03/05/2004 DEMMANU2 00000061 09805925

01 FC:1501  
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